2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41274

FILED Apr 28, 2009 Secretary of State

Entity Name: PALM HARBOR COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

455 RIVIERE RD

PALM HARBOR, FL 34683 US

Current Mailing Address: New Mailing Address:

455 RIVIERE RD

PALM HARBOR, FL 34683 US

FEI Number: 59-3040192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLY, DIANE JOHNSTON, CHAD T 455 RIVIERE RD. 455 RIVIERE RD.

PALM HARBOR, FL 34683 US PALM HARBOR, FL 34683 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHAD JOHNSTON 04/28/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: TR () Delete Title: T (X) Change () Addition

 Name:
 HARTER, JOHN
 Name:
 JOHNSTON, CHAD

 Address:
 2921 VALENCIA LANE E
 Address:
 217 S SPRING BLVD

City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: TD () Delete Title: T (X) Change () Addition

 Name:
 HOYT, TERESA
 Name:
 BLY, WILLIAM

 Address:
 577 HAMMOCK DR
 Address:
 403 ORCHID LANE

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34683 US

Title: TD () Delete Title: T (X) Change () Addition

Name: WILSON, LYNNE Name: PRYOR, MICHAEL

 Address:
 1754 LAGO VISTA BLVD
 Address:
 732 HARBOR WAY

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:
 PALM HARBOR, FL 34683 US

Title: () Delete Title: T () Change (X) Addition

Name: Name: BARULLI, GEORGE

Address: Address: 1398 BURNT OAK ST

City-St-Zip: City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: () Delete Title: T () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHAD JOHNSTON T 04/28/2009